

**California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form
Statewide, County and Hospital of Occurrence by Infant Race/Ethnicity: 2004**

	State/County/Facility Name	Infant Race/Ethnicity	Total Known Feeding	Any Breastfeeding	Exclusive Breastfeeding	% Any Breastfeeding	% Exclusive Breastfeeding
State	CALIFORNIA	African-American	26,141	18,314	7,981	70.1	30.5
State	CALIFORNIA	American Indian	542	415	249	76.6	45.9
State	CALIFORNIA	Asian	43,553	36,557	17,422	83.9	40.0
State	CALIFORNIA	Hispanic	270,248	225,842	78,303	83.6	29.0
State	CALIFORNIA	Multi-Race/Other	31,438	26,345	16,127	83.8	51.3
State	CALIFORNIA	Pacific Islander	788	538	216	68.3	27.4
State	CALIFORNIA	White	144,335	125,905	89,126	87.2	61.8
State	CALIFORNIA	Missing	4,514	3,537	2,014	78.4	44.6
State	CALIFORNIA	TOTAL	521,559	437,453	211,438	83.9	40.5
County	KERN	African-American	581	349	74	60.1	12.7
County	KERN	Asian	251	191	56	76.1	22.3
County	KERN	Hispanic	7,538	6,003	1,042	79.6	13.8
County	KERN	Multi-Race/Other	284	230	109	81.0	38.4
County	KERN	White	3,491	2,824	1,499	80.9	42.9
County	KERN	Missing	64	52	18	81.3	*
County	KERN	TOTAL	12,221	9,658	2,802	79.0	22.9
Facility	BAKERSFIELD MEMORIAL HOSPITAL	African-American	155	78	13	50.3	*
Facility	BAKERSFIELD MEMORIAL HOSPITAL	Asian	40	26	7	65.0	*
Facility	BAKERSFIELD MEMORIAL HOSPITAL	Hispanic	1,023	691	102	67.6	10.0
Facility	BAKERSFIELD MEMORIAL HOSPITAL	Multi-Race/Other	55	40	12	72.7	*
Facility	BAKERSFIELD MEMORIAL HOSPITAL	White	955	732	276	76.7	28.9
Facility	BAKERSFIELD MEMORIAL HOSPITAL	TOTAL	2,234	1,572	411	70.4	18.4
Facility	DELANO REGIONAL MEDICAL CENTER	Asian	34	28	*	82.4	*
Facility	DELANO REGIONAL MEDICAL CENTER	Hispanic	671	603	7	89.9	*
Facility	DELANO REGIONAL MEDICAL CENTER	TOTAL	744	663	9	89.1	*
Facility	KAISER BAKERSFIELD MEMORIAL	Hispanic	30	23	*	76.7	*
Facility	KAISER BAKERSFIELD MEMORIAL	TOTAL	59	46	7	78.0	*
Facility	KAISER MERCY SOUTHWEST HOSPITAL	African-American	33	25	7	75.8	*
Facility	KAISER MERCY SOUTHWEST HOSPITAL	Asian	47	37	13	78.7	*
Facility	KAISER MERCY SOUTHWEST HOSPITAL	Hispanic	487	387	161	79.5	33.1
Facility	KAISER MERCY SOUTHWEST HOSPITAL	Multi-Race/Other	29	27	12	93.1	*
Facility	KAISER MERCY SOUTHWEST HOSPITAL	White	353	292	190	82.7	53.8
Facility	KAISER MERCY SOUTHWEST HOSPITAL	TOTAL	956	774	386	81.0	40.4
Facility	KERN MEDICAL CENTER	African-American	187	123	13	65.8	*

**California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form
Statewide, County and Hospital of Occurrence by Infant Race/Ethnicity: 2004**

	State/County/Facility Name	Infant Race/Ethnicity	Total Known Feeding	Any Breastfeeding	Exclusive Breastfeeding	% Any Breastfeeding	% Exclusive Breastfeeding
Facility	KERN MEDICAL CENTER	Asian	30	19	*	*	*
Facility	KERN MEDICAL CENTER	Hispanic	3,258	2,783	302	85.4	9.3
Facility	KERN MEDICAL CENTER	Multi-Race/Other	42	36	5	85.7	*
Facility	KERN MEDICAL CENTER	White	531	389	85	73.3	16.0
Facility	KERN MEDICAL CENTER	TOTAL	4,062	3,360	414	82.7	10.2
Facility	MERCY SOUTHWEST HOSPITAL	African-American	75	55	22	73.3	29.3
Facility	MERCY SOUTHWEST HOSPITAL	Asian	67	56	24	83.6	35.8
Facility	MERCY SOUTHWEST HOSPITAL	Hispanic	819	657	286	80.2	34.9
Facility	MERCY SOUTHWEST HOSPITAL	Multi-Race/Other	61	50	30	82.0	49.2
Facility	MERCY SOUTHWEST HOSPITAL	White	991	876	557	88.4	56.2
Facility	MERCY SOUTHWEST HOSPITAL	TOTAL	2,030	1,707	927	84.1	45.7
Facility	RIDGECREST REGIONAL HOSPITAL	Hispanic	75	72	61	96.0	81.3
Facility	RIDGECREST REGIONAL HOSPITAL	Multi-Race/Other	31	30	30	96.8	96.8
Facility	RIDGECREST REGIONAL HOSPITAL	White	297	282	278	95.0	93.6
Facility	RIDGECREST REGIONAL HOSPITAL	TOTAL	424	404	387	95.3	91.3
Facility	SAN JOAQUIN COMMUNITY HOSPITAL	African-American	110	50	8	45.5	*
Facility	SAN JOAQUIN COMMUNITY HOSPITAL	Asian	27	19	*	*	*
Facility	SAN JOAQUIN COMMUNITY HOSPITAL	Hispanic	1,175	787	120	67.0	10.2
Facility	SAN JOAQUIN COMMUNITY HOSPITAL	Multi-Race/Other	61	43	20	70.5	32.8
Facility	SAN JOAQUIN COMMUNITY HOSPITAL	White	324	220	100	67.9	30.9
Facility	SAN JOAQUIN COMMUNITY HOSPITAL	TOTAL	1,703	1,124	253	66.0	14.9

Data Source: Genetic Disease Branch, Newborn Screening Data, 2004

Note 1: Data shown only for facilities listed as 'Regular Maternity', 'Kaiser', 'Alternative Birth Center', 'Pediatric', and 'Military' in the newborn screening database.

Note 2: Infant race/ethnicity is based upon mother and father race/ethnicity as recorded on the birth certificate.

Note 3: Data for facilities and counties with fewer than 25 total births with known type of feeding are not shown.

Note 4: Percents of any and exclusive breastfeeding are not shown for fewer than 20 events.

Note 5: Numbers of any and exclusive breastfeeding are not shown for fewer than 5 events.

Note 6: "Any Breastfeeding" includes those exclusively breastfeeding and those supplementing breastfeeding with formula. "Exclusive Breastfeeding" includes those who breastfeed only.

Note 7: Breastfeeding initiation rates vary widely by maternal characteristics. Data presented in these tables are not risk adjusted. Comparisons between facilities or among geographic locations should be made cautiously.

Note 8: The data used to develop these tables are from the California Newborn Screening Program database of the Genetic Disease Branch. All nonmilitary hospitals are required to complete the Newborn Screening Test Form (DHS 4409) prior to an infant's discharge. Upon completing the form, staff must select one of the following five categories describing 'all feedings since birth' (not including water feedings): (1) Breast only; (2) Formula only; (3) Breast and Formula; (4) TPN/Hypertal and (5) Other.

Note 9: The denominator used to compute the percent any and percent exclusive breastfeeding data is "Total Known Feeding". Births with missing or unknown method of feeding are excluded. In 2004, 2.78% of all births in California had missing or unknown feeding data.